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FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1 (a) Name of Individual Ownerization or Corneration		
(a) Name of Individual, Organization or Corporation AVACY INITIATIVES INC.		
(b) Address (number and street) check if different to 305 WEST BROADWAY #162	than previously reported	
(c) City, State and ZIP Code		2. FFC Identification Number
NEW YORK	NY 10013	3. FEC Identification Number
2. Occupation and Name of Employer (for Individual Filers O	Only)	C C90019332
4. TYPE OF REPORT (check appropriate boxe (a) April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report b) Is this Report an amendment? X No. 5. COVERING PERIOD: FROM THROUGH	24-Hour Report 48-Hour Report	M / D D / Y Y Y Y
TOTAL CONTRIBUTIONS TOTAL INDEPENDENT EXPENDITURES		.00
		, , , , , , , , , , , , , , , , , , , ,
Under penalty of perjury I certify that the independent expenditures report of, any candidate or authorized committee or agent of either, or any pole		, or concert with, or at the request or suggestion
TYPE OR PRINT NAME OF PERSON COMPLETING FORM	[Ele	DATE ectronically Filed]
Krone, David, Brett, ,	Krone, David, Brett, ,	06/08/2020
NOTE: Submission of false, erroneous or incomplete inf	formation may subject the person signing this report to	the penalties of 2 U.S.C. §437g.

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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IAME OF FILER (In Full) AVACY INITIATIVES INC.		
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination	
Red Mountain Media LLC Mailing Address 10 W Hargett	06 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
19 W. Hargett	Amount	
City State Zip Code	39800.00	
Raleigh NC 27601	Transaction ID : F57.000001	
Purpose of Expenditure Production and Distribution of Direct Mailer Category/ Type 004	Office Sought: House State: NY Senate District: 16	
Name of Federal Candidate Supported or Opposed by Expenditure: Engel, Eliot, , ,	President Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2020 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination	
Mailing Address	M = M / D = D / Y = Y = Y	
	Amount	
City State Zip Code		
Purpose of Expenditure Category/ Type	Office Sought: House State:	
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination	
	M M / D D / Y Y Y Y	
Mailing Address		
	Amount	
City State Zip Code		
Purpose of Expenditure Category/ Type	Office Sought: House State:	
Name of Federal Candidate Supported or Opposed by Expenditure:	District:	
The state of the s	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	39800.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	39800.00	